U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU

FORM **E-3** (2-16-2005)



ANNUAL SURVEY OF GOVERNMENT EMPLOYMENT MARCH 2005 - SPECIAL DISTRICTS AND LOCAL AGENCIES

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RETURN TO:

U.S. Census Bureau 1201 East 10th Street Jeffersonville, IN 47132-0001

In correspondence pertaining to this report, please refer to the Census File Number above your address

Please check here if your address has changed.

INTERNET RESPONSE: If you prefer, you may respond
to this survey via the Internet at the following web
address: http://harvester.census.gov/sge/index.html
You will only need your User ID to access the Internet form

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DATA SU	РΡΙ	EW	

Name			
Title		Area Code and Phone Number	Extens
Fax	E-Mail		

PAID EMPLOYEES/OFFICIALS

Please complete this survey form if your agency currently has paid employees/officials.

If your agency has **NO PAID** employees/officials, mark (x) here \longrightarrow and check the appropriate box below:

This agency **MAY** have paid employees/officials in the future.

This agency IS NOT LIKELY to have any paid employees/officials in the future.

PART I - FULL-TIME STANDARD WEEKLY HOURS

What is the average or standard number of **weekly** hours of work for the MAJORITY of your full-time employees? Mark (X) ONE box only.

A 39 hours or more C 34 to 37.4 hours E 30 to 31.9 hours

B 37.5 to 38.9 hours D 32 to 33.9 hours

Less than 30 hours per week should be reported as Part-Time.

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PART II - PAY INTERVAL



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How frequently are employees paid for their services? Provide the payroll amount in Part III for the pay period you indicate here.

Full-time employees (all or most) Mark (X) ONE box only				art-time employee	s (all	or most)	
М	Monthly	Q	Quarterly	М	Monthly	Q	Quarterly
Т	Twice a month	S	Semi-Annually	Т	Twice a month	S	Semi-Annually
В	Bi-Weekly	Α	Annually	В	Bi-Weekly	Α	Annually
W	Weekly			W	Weekly		

PART III - EMPLOYEES, PAYROLL, AND PART-TIME HOURS

Report data for the ONE PAY PERIOD, which includes March 12, 2005 and corresponds to the pay interval marked in Part II. If some employees are on a different pay interval from the majority, please report these employees, their payroll, and any part-time hours separately as indicated in the special instructions.

	Full-time E	mployees	Part-time Employees			
Type of Employee	Number of Employees	Gross payroll for employees in column (a) (omit cents)	Number of Employees	Gross payroll for employees in column (c) (omit cents)	Total paid part- time hours for amounts reported in column (d) (Estimate if unknown)	
	(a)	(b)	(c)	(d)	(e)	
Report full-time employees in column (a) and their payroll in column (b) for the pay interval indicated in Part II. Report part-time employees in column (c) and their payroll in column (d) for the pay interval indicated in Part II. Report in column (e) the total hours paid for all part-time employees in column (c) during the pay interval. If actual hours paid are not available, enter an estimate.						

Additional	remarks - Please	indicate below an	y groups of your	employees	for which	you could	not supply
information	or any difficulties	you encountered i	in completing the	form.			



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DEFINITIONS

EMPLOYEES – Persons paid for personal services performed in the indicated pay period, including persons in a paid leave status. **Include** any officials paid on a salary basis; by fees or commissions; on a per meeting basis; or a flat sum quarterly, semiannually, or annually. **Exclude** employees on unpaid leave, unpaid officials, pensioners, and contractors and their employees.

FULL-TIME EMPLOYEES – Persons employed during the pay period to work the number of hours per week that represents regular full-time employment. **Include** temporary or seasonal employees who are working the number of hours that represents full-time employment.

PART-TIME EMPLOYEES – Persons employed on a part-time basis during the designated pay period. **Include** those daily or hourly employees usually engaged for less than the regular full-time workweek, as well as any part-time paid officials. **Exclude** here, and report as full-time, any temporary or seasonal employees working on a full-time basis during this pay period.

PAYROLL (GROSS BEFORE DEDUCTIONS) — Salaries, wages, fees, or commissions earned by employees during (or applicable to) the pay period(s) which includes March 12, 2005. Include overtime, premium, night differential pay, bonuses, and incentive payments that are paid at regular pay intervals. Include amounts withheld for taxes, employee contributions to retirement systems, etc. Exclude lump sum payments and the value of living quarters and subsistence allowances furnished to employees. If some employees are on a different pay interval from the majority, please report these employees, their payroll, and part-time hours separately as indicated in the Special Instructions for Part III.

PART-TIME HOURS PAID – Total hours actually paid during the pay interval for all persons working less than the number of hours that represents full-time employment. **Include** an estimate of hours worked during the pay interval for part-time employees not compensated on an hourly basis.

GENERAL INSTRUCTIONS

- 1. Indicate in **Part I** the standard weekly hours of work for most full-time employees.
- 2. Indicate in **Part II** the length or frequency of your pay interval.
- 3. Include all current employees whether paid from the general fund or special funds.
- 4. Report in **Part III** gross payroll amounts for just the one pay period which includes March 12, 2005.
 - a. **Do not** report cumulative salaries since the beginning of the calendar or fiscal year.
 - b. **Do not** report payroll amounts from last fiscal year.
 - c. **Do not** report the employer costs of non-wage employee benefits such as workers' compensation, FICA, health insurance, etc.
- 5. Include total paid hours of work for part-time employees in **Part III**, column (e). If actual hours are not known, please enter an estimate.
- 6. Use the reporting format shown in **SPECIAL INSTRUCTIONS FOR PART III** if you have multiple pay intervals.

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7. If you are unable to supply any of the information requested in **Part III**, please list in "Additional remarks" the source(s) of the missing information (including address and telephone number).

- 8. If exact figures are not available, enter estimates and mark with an asterisk.
- 9. Complete the "Data supplied by" box on the front of the form and return the completed questionnaire in the envelope provided.
- 10. Retain a copy of the completed questionnaire for your records.

SPECIAL INSTRUCTIONS FOR PART III

Report separately in Part III all employees, payrolls, and part-time hours that are on a pay interval different from the one reported in Part II, PAY INTERVAL. Write a pay interval code M, T, B, W, Q, S, or A next to payroll amounts and part-time hours to indicate applicable pay interval.

For example, if your government has three (3) full-time employees and three (3) part-time employees and each is paid at different pay intervals, report data separately as shown in the following example:

Part III EMPLOYEES, PAYROLL, AND PART-TIME HOURS						
Full-time 6	employees	Р	art-time employees			
Number	Payroll	Number	Payroll	Hours		
1 1 1	\$3,500 (M) \$550 (W) \$20,000 (A)	1 2	\$1,100 (B) \$10,500 (Q)	114 (B) 1,000 (Q)		

In this example, \$3,500 represents the monthly (code M) amount for 1 full-time employee; \$550 represents the weekly (code W) amount for 1 full-time employee; and \$20,000 represents the annual (code A) amount for 1 full-time employee; and \$1,100 represents the biweekly (code B) amount for 1 part-time employee. \$10,500 represents the quarterly (code Q) amount for 2 part-time employees.

NOTE: Please note that this is a national form that applies to governments with wide differences in the size of their service areas, the amount of the population served, and the extent and complexity of their activities. Public reporting burden for this collection of information is estimated to vary from 10 minutes to 1½ hours per response, with an average of 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Under the Paperwork Reduction Act, we cannot ask you to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Paperwork Project 0607-0452, Room 3110, Federal Building 3, U.S. Census Bureau, Washington, DC 20233-1500. You may e-mail comments to Paperwork@census.gov; use Paperwork Project 0607-0452 as the subject.